## **Indiana State Department of Health**

## **Preventive Health and Health Services Block Grant Committee Meeting Minutes**

## March 10, 2014

Present: Kristin Adams (Block Grant Coordinator; Proxy for State Health Commissioner), Pam Pontones, Linda Stemnock, Brian Carnes, Katie Gatz, Ann Alley, Champ Thomaskutty, Helen Schwartzel

Absent: Art Logsdon

- 1. Update of additional changes/efforts of PHHS Block Grant—the block grant has been transferred from the Chronic Disease Section to the Office of State, Territorial, Local, and Tribal Support. This change will reduce the focus of the block grant on chronic diseases. Funding is now part of the Affordable Care Act through the Preventive Public Health Fund, which enables an increase in funding to \$2 million plus. Staffing—names of positions paid for by the Block Grant must be included in work plans. Each person/activity must be identified with a Healthy People 2020 goal/objective. Names of employees, position title, and percent of time charged must be indicated. PPHF Requirements include reporting on contracts awarded over \$25,000. Reports are required twice a year.
- 2. Individual Funding Requests—
  - A. Chronic Disease--\$722,000. Multiple activities could be funded with this additional money; specifically, a complex care management concept; medical therapy management (multiple providers (medical and mental) with multiple medications); aging and/or disabled population with multiple chronic diseases—a way to coordinate and treat this population; community health workers—how to help in this setting; behavioral health; train the trainers concept. A look at 1,800 patients with multiple chronic diseases costs approximately \$300 million a year in care.
  - B. Michelle and Matt—continue funding \$60,000 for Matt as the work being performed is tied to chronic disease data gathering; continue \$110,000 for Michelle Sandoval, CDC Advisor for chronic disease infrastructure support
  - C. Leadership at all Levels—currently being evaluated and revised. This would be under workforce development

- D. 3. Injury Prevention--\$250,000 current level paying for salaries and data analysis; asking for continued funding while trying to take advantage of current legislation which is tied to a Board and money that is not being spent.
- E. 4. OPHPM—block grant pays for salaries and will be picking up funding was requested for the Indiana Indicators website; staff person in Vital Records to support the Infant Mortality agency priority; other workforce development opportunities such as health officers meetings, quality improvement training and other areas.
- 3. Un/underfunded programs—Brian Carnes suggested include child fatality review program. Ann Alley recommended a discussion with the Office of Women's Health and opportunities for LHDs. Kristin recommended contacting the TB program for additional opportunities.
- 4. Leveraging of funds/work—everything we do must be tied to Healthy People 2020 goals and objectives.

Two more meetings are required for the PHHS Block Grant—another advisory meeting and one public hearing.